

# MONTANA YOUTH RANGE CAMP



P.O. Box 201601 \* Helena, MT 59620 \* 406.444.6667 \*

<http://dnrc.mt.gov/cardd/camps/rangecamp/default.asp>

## Camp Rules and Application Form

These rules are intended to assist in providing for the health, safety, and social well being of everyone attending the Montana Youth Range Camp. If a situation or question arises that is not clearly covered by this list, ask the Camp Coordinator before acting.

- Fireworks, firearms, or any type of weapons are not permitted. Illegal drugs, tobacco, and intoxicants of any kind are not permitted. Prescription drugs must be reported prior to start of camp. *See Health Form for details.*
- If it is necessary to drive your personal vehicle to camp, it must remain parked until your departure. Keys will be collected at registration. Permission to leave camp will be granted in the event of a PERSONAL EMERGENCY ONLY. You must have parental/guardian approval. You must obtain the Camp Coordinator's permission before leaving camp for any purpose.
- Respect the camp facilities and natural surroundings - do not deface or destroy them in any way. Deposit all litter in the containers provided. Respect the privacy of others. Boys are NOT permitted in girls' cabins. Girls are NOT permitted in boys' cabins. NO EXCEPTIONS!
- Attendance at instructional sessions and scheduled activities is required - be prompt.
- Violation of any of these rules is grounds for dismissal and forfeiture of camp fees. Parents and/or the person recommending the camper will be promptly notified. Any individual so dismissed must call a parent or guardian and arrange transportation home. It is not possible to anticipate every possible situation that might come up. In the absence of a rule regarding a specific activity or situation - **COMMON SENSE AND COURTESY PREVAIL.**

## Code of Conduct Agreement

I understand the rules for participation in the Montana Youth Range Camp and understand that I may be expelled from the camp for violating this agreement. I also understand that if I break the camp rules I will not be allowed to return to future Montana Youth Range Camps.

Delegate's Signature \_\_\_\_\_

## Concurrence by Parent or Guardian

I understand the above agreement and agree to be available to pick up my son or daughter at the camp should he or she have to leave the camp for disciplinary reasons. I also understand that if I am unavailable to pick up my child because of medical or disciplinary problems and/or if my son or daughter breaks camp rules he or she will not be allowed back to future Montana Youth Range Camps.

Parent's/Guardian's Signature \_\_\_\_\_

**\*\*The agency reserves the right to expel any child who becomes disruptive to the program, staff or other children attending the camp.\*\***

## Application – Montana Youth Range Camp

1. Name \_\_\_\_\_ Age \_\_\_\_\_  
(Please Print or Type)

2. Give the name and telephone number of an individual that may be contacted as a reference. This person may be a teacher, youth group leader, county agent, area rancher, etc.

Name \_\_\_\_\_ Telephone (    ) \_\_\_\_\_

Although you are not required to have any prior range experience, please complete the following.

3. Have you ever attended a Montana Youth Range Camp or Montana Range Days?

YES      NO      If "Yes," how many camps? \_\_\_\_\_

4. Have you ever received any range management

or plant identification training ? YES      NO      If YES, where? \_\_\_\_\_

Have you received any awards from competitions? \_\_\_\_\_

\_\_\_\_\_

Have you had any experience related to range management? \_\_\_\_\_

\_\_\_\_\_

Do you have any special talent or skill you would like to share? \_\_\_\_\_

\_\_\_\_\_

At least 3 emergency contact information numbers must be documented for each child attending the camp. All emergency contact persons must be certified as authorized by the parent or legal guardian to pick up the child should an emergency arise or if the child needs be expelled from the camp due to disruptive behavior problems.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**APPLICATION DEADLINE JUNE 29th**

## Delegate's Medical Coverage

Date \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Town \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Home Phone (    ) \_\_\_\_\_

Male                      Female

Parent or Guardian \_\_\_\_\_

Address \_\_\_\_\_

Town \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone (    ) \_\_\_\_\_

Family Physician \_\_\_\_\_

Address \_\_\_\_\_

Town \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone (    ) \_\_\_\_\_

Medical Insurance Coverage \_\_\_\_\_

Policy Number \_\_\_\_\_

Person to contact if family can't be reached

Name \_\_\_\_\_

Phone (    ) \_\_\_\_\_

Additional Comments:

---

---

---

---

---

---

---

---

---

---

## Health Form

*(Please use additional sheets of paper if necessary)*

Delegate's Name \_\_\_\_\_

1. Do you have any physical complaint or chronic illness at this time?

YES NO If so, explain. \_\_\_\_\_

2. Are you under the care of a doctor for any reason?

YES NO If so, for what reason? \_\_\_\_\_

3. Are you taking medications of any type?

If so, what medicine, at what dosage, and at what time intervals?

Camp personnel will hold and dispense medication following Doctors', parents' or \_\_\_\_\_

4. Do you have or have you had?

YES NO Diabetes (please include directions for simple diabetes related care)  
YES NO Asthma  
YES NO \* Allergies (medical, drug, food, insect, other) \_\_\_\_\_  
YES NO Tetanus Shot (if not, it is recommended that you do so prior to camp.)

5. Do you have any diseases that are communicable through the types of incidental contact?

YES NO If so, what? \_\_\_\_\_

6. Do you have any medical problems or special needs of which we should be aware?

YES NO If so, what? \_\_\_\_\_

7. Do you wear Medic Alert Tags?

YES NO If so, give the reason or medical condition. \_\_\_\_\_

I am of the opinion that the above named delegate can safely participate in this event and that she/ he has no contagious or communicable disease.

His or her health is: \_\_\_\_\_ (poor, fair, good).

I hereby give my consent for the above named individual to attend this event. In case of emergency, I understand that every effort will be made to contact me. In the event I cannot be reached, I hereby give permission to the physician selected by the staff to hospitalize and secure proper treatment (including emergency surgery).

Parent's/Guardian's Signature \_\_\_\_\_ Date \_\_\_\_\_

Phone: Day ( ) \_\_\_\_\_ Night ( ) \_\_\_\_\_

Medication to counteract allergic reactions must be provided by the delegate's parent or guardian.

## **MONTANA YOUTH RANGE CAMP**

The Montana Youth Range Camp is a five-day program for youth ages 12-18. The camp provides an excellent opportunity for youth of varying backgrounds from throughout Montana to become more aware of the value and potential of Montana's largest resource - rangeland. A well-organized, balanced and educational range program is provided by bringing together knowledgeable range personnel and interested participants in a field workshop environment. Evening programs and activities allow campers the opportunity to develop lasting friendships.

### **CONTESTS AND AWARDS**

- Top Hand Award - Awarded to the camper with the highest total score for all contests, as determined by experience and age.
- Green Hand Award - Awarded to the first-year camper with the highest total score for all contests, as determined by experience and age.
- Top Team Award - Awarded to the team with the highest composite score for group presentation of Ranch Problem.
- Ribbons - Awarded for first through fourth places in all categories.

**You do not have to be a member of 4-H or FFA to attend.**

**Permission of parent or guardian is required!**

### **THE PROGRAM**

- Plant Identification/Anatomy: Learn about 25 of Montana's important range plants. Identify plants by vegetative class, lifespan, origin, season of growth and grazing response. Study basic plant anatomy.
- Range Inventory, Planning and Monitoring: Identify plants and plant communities in different rangeland environments. Learn to take photos of how plant communities change over time. Learn to identify indicators of healthy rangelands. Discover how livestock and wildlife interact with plants to keep rangelands healthy.
- Grazing Management, Wildlife and Livestock: Learn about the types of wildlife in Montana, the interaction between wildlife and domestic livestock, animal habitat, range health and grazing management options.
- Riparian/Water: You'll stay cool in water class, while learning about stream dynamics, and discovering aquatic insects. Also learn about watershed management and how it relates to the land.
- Geology/Soils: Learn about basic rocks and minerals, soil formation, how soils relate to rangeland, dig soil pits, determine soil texture and learn why soils are so important!
- Enjoy presentations around the campfire, lots of recreational activities, and a dance the last evening!

## Montana Youth Range Camp Registration Form

### Authorization of Parent or Guardian

I, \_\_\_\_\_ being the parent (legal guardian) of \_\_\_\_\_, certify that he/she is \_\_\_\_\_ years of age, grant permission for him/her to participate in the Montana Youth Range Camp, and will not hold sponsoring organizations or their representatives responsible in case of accident.

I acknowledge that camp activities, including instruction, entail known and inherent risks, as well as unknown/unanticipated risks which could result in serious physical or emotional injury, paralysis, death, or damage to myself, third parties and my own or other's property. I understand such risks cannot be eliminated without jeopardizing the essential qualities of the activity. I expressly agree and promise to accept and assume all of the risks existing in these activities. My participation in these activities is purely voluntary and I elect to participate, in spite of the all risks.

I understand I am financially responsible for any medical treatment and/or emergency evacuation resulting from participation in any of these activities. By signing this document, I acknowledge that if anyone is hurt or property is damaged during my participation in these activities, I may be found by a court of law to have waived my right to maintain a lawsuit against the MT Youth Range Camp on the basis of any claim from which I have released them herein. I have had sufficient opportunity to read this portion of the document. I have read and understand it and agree to be bound by its terms.

Signature of Parent/Guardian \_\_\_\_\_

Printed Name: \_\_\_\_\_

Delegate's Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Age \_\_\_\_\_ Sex: M \_\_\_\_\_ F \_\_\_\_\_

Range experience: Beginner \_\_\_\_\_ Intermediate \_\_\_\_\_ Advanced \_\_\_\_\_

I first heard about the Montana Youth Range Camp through: \_\_\_\_\_ Friends \_\_\_\_\_ Family \_\_\_\_\_ School  
\_\_\_\_\_ Internet \_\_\_\_\_ media \_\_\_\_\_ other (please explain) \_\_\_\_\_

First-time MT Youth Range Camper \_\_\_\_\_ Return Camper \_\_\_\_\_

T-shirt size: Small \_\_\_\_\_ Medium \_\_\_\_\_ Large \_\_\_\_\_ X-Large \_\_\_\_\_ XX-Large \_\_\_\_\_

The cost of the camp is \$110.00, which includes meals from Monday lunch through Friday lunch, lodging, T-shirt and study materials. You will need to provide your own transportation to and from the camp. Local conservation districts, County extension agents, or VO-AG teachers may be able to help arrange transportation. Check with your local conservation district regarding possible sponsorships to cover expenses. After we receive your registration, we will send you confirmation and more details on how to get to the camp. *Please send your registration by July 3rd.*

### ***Send your registration form and check or money order for \$110.00 to:***

Montana Youth Range Camp  
Treasure County Conservation District  
211 Elliott Street, PO Box 288  
Hysham, MT 59038  
342-5466 x 102

Cheryl Menke, District Administrator  
E-mail: <mailto:cheryl.menke@mt.nacdnet.net>

For questions, please call:  
Heidi A. Olbert  
Rangeland Resource Program Specialist  
Department of Natural Resources and Conservation  
(406) 444-6619  
[HOlbert@mt.gov](mailto:HOlbert@mt.gov)

